

REMARKS

Claims **1-16** are cancelled. Claims **17-74** have been added. Claims **17, 23, 41, 47** and **67-74** are independent.

Each of claims **17-74** is fully supported in the specification as filed. No new matter has been added. If the examiner has any questions regarding this amendment or the present application, the Examiner is cordially requested to contact Applicants' representative.

CONCLUSION

The Examiner's early examination and consideration are respectfully requested. If the Examiner has any questions regarding this amendment or the present application, the Examiner is cordially requested to contact Applicants' representative.

PAYMENT

Enclosed herewith is the surcharge fee of **\$3,700** for filing thirty-eight (38) dependent claims over twenty (20) and nine (9) independent claims over three (3).

No other fees are believed to be due, but please charge any other fees that may be required for this Preliminary Amendment to **Deposit Account No. 50-0271**. Furthermore, should an extension of time be required, please grant any extension of time which may be required to make this Preliminary Amendment timely, and please charge any fee for such an extension to **Deposit Account No. 50-0271**.

Respectfully submitted,

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